### **Application Data Sheet**

## **Application Information**

Application number::	
Filing Date::	July 24, 2003
Application Type::	Utility
Subject Matter::	
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	·
Title::	Avian Cell Lines Useful for the Production of
	Substances of Interest
Attorney Docket Number::	37991-0017
Request for Early Publication?::	No
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	5
Small Entity?::	Yes
Latin name::	
Variety denomination name::	
Petition included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contractor Grant Numbers::	
Secrecy Order in Parent Appl 2"	

#### **Applicant Information**

**Applicant Authority Type::** 

Primary Citizenship Country::

France

Status::

Given Name::

Bertrand

Middle Name::

Family Name::

**PAIN** 

Name Suffix::

City of Residence::

Lyon

State or Province of Residence::

Country of Residence::

France

Street of mailing address::

4bis, Place Bir-Hakeim

City of mailing address::

Lyon

State or Province of mailing address::

Country of mailing address::

France

Postal or Zip Code of mailing address:: 69003

**Applicant Authority Type::** 

Primary Citizenship Country::

France

Status::

Given Name::

Fabienne

Middle Name::

Family Name::

**GUEHENNEUX** 

Name Suffix::

City of Residence::

Orvault

State or Province of Residence::

Country of Residence::

France

Street of mailing address::

115, avenue de la Ferrière

City of mailing address::

Orvault

State or Province of mailing address::

Country of mailing address::

France

Postal or Zip Code of mailing address:: 44700

## **Correspondence Information**

Correspondence Customer Number::	26633
Name::	
Street of mailing address::	
,	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Phone number::	
Fax Number:	
	•
E-Mail address::	

# **Representative Information**

Representative Customer Nun	nber:: 2	6633 		
- OR -	·			
Representative Designation::	Registration	n Number::	Representative Name:	:
		·····		
		·		

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
		·	

## **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
PCT	PCT/FR03/00735	7 March 2003	YES
France	0202945	8 March 2002	YES

#### **Assignee Information**

Assignee name::

**VIVALIS** 

Street of mailing address::

Lieudit La Corbière

City of mailing address::

Roussay

State or Province of mailing address::

Country of mailing address::

France

Postal or Zip Code of mailing address:: 49450